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**Research Program: Independent Study**

**Title: “Psychophysiology of Vicarious Responses”**

Empathy, which is generally defined as the capacity to understand and share the feelings of others, can be divided into three main components: perspective-taking (putting yourself in the others’ position), affective resonance (neural and physiological responses that mirror the other), and emotional regulation (management of your own emotions). These three components differ among individuals, which lead to differences in empathic capacity between people. These differences can allow people to be divided into two groups: the “self-oriented”, who are less likely to experience empathy for the other and more likely to feel for themselves instead, and the “other-oriented”, who are more likely to feel for others and experience empathy.

The further classification and defining of these two categories is being examined in the present study. Participants will watch short videos of painful physical experiences in an associative-learning paradigm, and their level of empathy will be approximated through a series of physiological responses, self-report measures, and behaviour. Since empathy is an important social phenomenon, this study hopes to clarify the human experience of empathy in response to others’ pain, leading to future predictions on whether or not a particular individual will be motivated to act prosocially in a given situation.